# A publication of the Alabama Department of Public Health

# Randy Strickland Donates Kidney

ureau of Information Technology employee Randy Strickland understands the pain and feeling of helplessness families suffer when a child is lost to cancer. His 6-year-old daughter Maria died Dec. 11, 2006, after undergoing a four-year struggle with cancer which included hospital stays in Seattle, Wash. Strickland resolved to do whatever he could to help others facing certain death by registering as an organ donor.

"Seeing kids with serious medical issues and life-threatening illnesses really causes you to look at life with a different perspective," Strickland said. "I made a leap of faith that if there is something I could do, I would do it. By comparison, I thought this would be a small sacrifice and it was a very easy decision to make."

Every 14 minutes a new name is added to the national organ transplant waiting list. The waiting list will top 100,000 persons in 2008.

When Strickland learned there was a match for his kidney, he drove unaccompanied 1,800 miles to Banner Good Samaritan Hospital in Phoenix, Ariz., for further testing. This included an interview with a psychiatrist who asked open-ended questions about why he wanted to donate, about his late daughter, and other aspects of his life before she determined he was suitable psychologically to donate.

Testing included an extensive matching process for donor and recipient to lessen the chances of rejection. Strickland then underwent a medical procedure to correct a concern the medical staff found and which to minimize the risk of medical complications afterward. Finally, he received the okay to have the kidney transplant surgery which will possibly save the life of a young mother of three children.

After meeting with the surgeon at 7:30 a.m., he remembers hearing the song "Another One Bites the Dust" and he was



Randy Strickland met with the Arizona mother who received his donated kidney.

out of consciousness until 5 p.m. that day. Although he has experienced some pain subsequently, he still was able to drive back to Alabama by himself after a short recovery period in Arizona.

Strickland's donation was generous in many ways because in addition to donating his kidney for transplantation, his own food,

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# Commendations

I

fyou would like to praise employees for their accomplishments, send letters of commendation to the State Health Officer or the employee's supervisor and a copy by e-mail to asheehan@adph.state.al.us for inclusion in this list. Four items are needed: the employee's name, work unit, name of he person making the commendation, and his or her city and state.

Marcia Allan, BSN, CM Escambia County Health Dept. **Betty Dawson, LBSW** Butler County Health Dept. Charlotte Detlefsen, BSN, CM Clarke County Health Dept. Judy Durden, LBSW Escambia County Health Dept. Kimberly Gordon, LGSW Butler County Health Dept. **Deborah Leigh Hooks, LGSW** Clarke County Health Dept. Peggy J. Roberts, BSN, CM Clarke County Health Dept. Hope Steadham, BSN, CM Clarke County Health Dept. Suzanne Terrell, LGSW Clarke County Health Dept. from Renae Carpenter, LCSW, PIP Grove Hill, Ala.

> Marie Carastro Debi Foster Joni Phelps Patricia Watson Jackie Wray

Health Provider Standards from Jeff Kirby Dothan, Ala.

#### Arlinda Cejas Regina Runderson Sherry Stabler

Health Provider Standards from Robert J. Coker, Jr. Eutaw, Ala.

#### Justin George Sondra Reese

Health Promotion and Chronic Disease from Gwendolyn Lipscomb Montgomery, Ala.

#### **Cassandra Henderson**

Center for Health Statistics from Jimmie Hudson Portland, Ore. Jeanette Pate Brandon, Miss.

#### **Chastsie Hooper**

Professional and Support Services from Geraldine Daniels Montgomery, Ala.

#### Mike Jarrett Vivian Rankin Frederick Reeves

Health Provider Standards from Glenda Miller Demopolis, Ala.

#### Regina Henderson Mike Jarrett Frederick Reeves Sherry Stabler

Health Provider Standards from Brian L. McFeely Mobile, Ala.

> Liz McGraw Beverly Morgan Connie Pavelec Carolyn Thomas Melanie Webster

Health Provider Standards from Jerry W. Moss and staff Vestavia Hills, Ala.

#### **Kathy Peters**

Center for Health Statistics from Marlo Carson Brent, Ala.

#### **Janis Pritchett**

Financial Services from Sherry Bradley Montgomery, Ala.

#### Evelyn Scott Carolyn Thomas Melanie Webster

Health Provider Standards from Dahl Daniel Monika Whitehead Montgomery, Ala.

#### **Ruthie Spencer**

Health Provider Standards from Heather Stevens PharmD, MBA Address unlisted

#### **Robert Starr**

Computer Systems Center from Sherry Bradley Montgomery, Ala.

#### Tamekia Reynolds

Family Health Services, WIC from Don Bird
Montgomery, Ala.

#### Alabama Department of Public Health Mission

To serve the people of Alabama by assuring conditions in which they can be healthy.

#### Value Statement

The purpose of the Alabama Department of Public Health is to provide caring, high quality and professional services for the improvement and protection of the public's health through disease prevention and the assurance of public health services to resident and transient populations of the state regardless of social circumstances or the ability to pay.

The Department of Public Health works closely with the community to preserve and protect the public's health and to provide caring quality services.

#### Alabama's Health

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Noelle Ahmann	Graphic Designer



#### Kidney, continued from page 1....

lodging and travel expenses came out of pocket and he used 160 hours of his own leave time.

"I am fortunate that I could figure out a way to do this," Strickland said. "For example, a family I met at a restaurant offered to pick me up from the hospital after surgery because I would be unable to drive. As another example, I attended services at Golden Canyon United Methodist Church in a town of 3,000 people outside Phoenix the Sunday before my surgery. After discharge from the hospital I expressed interest in attending the upcoming Sunday as well. A church member offered to pick me up for that service, too. For some without a support system kidney donation could be very difficult."

Strickland said his reward came from helping the recipient. She is African American, 31 years old and a single mother who had been on kidney dialysis. The recipient has been ill since 2001 and was on the transplant list for slightly more than two years. With her new kidney functioning well, the young mother no longer has to undergo dialysis and is seeking employment. The underlying cause of her kidney disease was hypertension.

The recipient's children, ages 11, 12 and 14, were eagerly anticipating the changes that will take place now that their mother feels better with her new kidney and the recipient's condition will enable her to hold down a job once again.

"Speaking from experience, it is an incredible feeling to see joy in the face of a mother, a recipient who can now enjoy simple pleasures we often take for granted," Strickland said. "My recipient is a 31-year- old single mother of three. One of her excited daughters said, 'Mom will soon be able to go swimming or travel with us.' She is now a mother who will have enough energy to participate fully in their lives without the burden and pain of dialysis. This is the true reward."

Weeks after donating his kidney, Strickland still has no regrets about his decision and invites others to do the same when obtaining or renewing their driver's license. Persons who decide to become an organ donor after being issued their licenses can obtain an organ donor sticker from their county probate office to place on their driver's license.

Jennifer Lord, a social worker with the Limestone County Health Department, also donated a kidney and was asked to tell her story in the July 2008 issue of *Alabama's Health*. She said she "definitely has no regrets" about the donation. "When I speak to the gentleman who received my kidney and he tells me 'life is great' it makes me smile. I was very fortunate to have my sick leave and supportive friends and family."

Wendy Dixon-Flamand of Office of Minority Health also encourages everyone to sign up for organ donation. "I had a brother who died in a car accident. By the time he arrived at the hospital (and the ability to contact my sister-in-law for his wishes), the only organ left to donate was his corneas. His eyes made it possible for that person to see. The reality of another individual being able to continue life in a 'normal' capacity due to transplantation is phenomenal!"

Our next issue will describe the Live Organ Donor Assistance Fund Strickland is establishing.

# Consider Applying for Myers Scholarship

bw is the time to consider applying for the Ira L. Myers Scholarship. The Ira L. Myers Scholarship is a \$6,000 scholarship provided to an individual who has been accepted to the University of Alabama at Birmingham School of Public Health. Funding is provided through a partnership with the Alabama Public Health Association and the University of Alabama at Birmingham School of Public Health.

Recipients of the Ira Myers Scholarship must be accepted for admission as a candidate for a Master or Public Health or Doctor of Public Health degree at the University of Alabama at Birmingham. For further information please contact Ricky Elliott at (251) 867-5765 or by email at relliott@adph.state.al.us.

# Give to the State Combined Campaign

he State Combined Campaign supports the work of nearly 600 approved charitable agencies and organizations. These agencies fight disease, make life more meaningful for the young and aged, assist the impoverished, and help people become economically self-sufficient.

You may give either through payroll deduction or though a one-time gift by cash or check. Visit http://adph.org/scc/ for more information.

# Former State Health Officer Dies in Montgomery

ormer State Health Officer Dr. Ira Lee Myers died July 23 in Montgomery. Dr. Myers served as Alabama's state health officer from 1963 until his retirement in April 1986. At the time of his retirement he was the longest-serving health officer in the nation. Dr. Myers began his service with the Alabama Department of Public Health in 1955.

During his era in public health, countless advances were made in the treatment of disease and he initiated the mass Salk polio vaccine program as a part of his early work. He was instrumental in the initiation of a narcotics enforcement program, newborn screening, computerization, and support of a laboratory system. During his tenure there were declines in infant and maternal mortality, and facility expansions through the Hill-Burton Act.

State Health Officer Dr. Donald Williamson said, "Dr. Myers was a giant in public health. Many of the programs begun by Dr. Myers remain essential today."

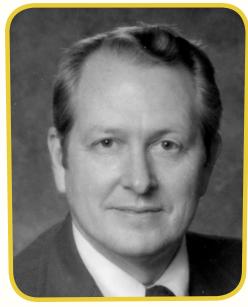
During his long career of public service, Dr. Myers received many honors and awards which include the following: the Delta Omega Award for scholastic excellence, Harvard School of Public Health; William Henry Sanders Award and the Physicians Recognition Award of the Medical Association of the State of Alabama: D.G. Gill Award of the Alabama Public Health Association; Alabama Public Health Association Hall of Fame: Alabama Academy of Honor, Senior Citizens Hall of Fame, Arthur C. McCormack Award of the Association of State and Territorial Health Officials; Director of Medical Specialists, American Men and Women of Science, World Environmental Director, Who's Who in America and the World.

Dr. Myers served in leadership positions with many professional organizations and received appointments to many national advisory committees. The Alabama Public Health Association established the Ira L. Myers Scholarship to the University of Alabama at Birmingham School of Public Health and created the Ira L. Myers Award for Excellence in his honor.

Born in Madison County in 1924, he spent his early life in small towns and in rural areas of northern Alabama. After earning a B.S. degree from Howard College (now Samford University) he was awarded an M.D. degree from the Medical College of Alabama in 1949 and served as an extern in South Highland Infirmary in Birmingham. He interned at the United State Public Health Service Marine hospital in Seattle, Wash., and was awarded a Master of Public Health degree (cum laude) from Harvard University School of Public Health in 1953.

From 1950-1955 he was an epidemiologist with the Public Health Service; Senior Surgeon, chief Epidemic Intelligence Officer, Communicable Disease Center; participated in field studies of polio epidemiology and in field trials of the Salk polio vaccine. With other noted national public health physicians, Dr. Myers co-authored several scientific articles in national publications detailing the cause, effects and treatment for polio and other similar viral infections.

Dr. Myers returned to Alabama in 1955 as administrative officer and assistant to then State Health Officer, Dr. D.G. Gill. He helped initiate the mass Salk Polio Vaccine program for the state, initiated the Hospital Service for the Indigent and the Medical Aspects of Assistance for the Aged Programs (Kerr-Mills Law). He served as chairman of the Alabama Water Improvement Commission, 1963-1982, and the initiated the Narcotic



Ira L. Myers, M.D.
Control Program in 1967. Dr. Myers was president of the Association of State and Territorial Health Officials in 1972.

On the occasion of his retirement then U.S. Surgeon General Dr. C. Everett Koop and oral polio vaccine developer Dr. Albert B. Sabin were honored guests at the retirement celebration held by the Alabama Public Health Association.

Dr. Myers was highly involved as a Baptist layman and was a deacon, trustee and Sunday School teacher at Dalraida Baptist Church. He also served on the Alabama Baptist State Convention Executive Board, as chairman of the Retirement Center Board, on the Disaster Relief Committee and on the Judson College Board of Advisors. Dr. Myers endowed the Martha and Dorothy Myers Fund for Faculty Development at Judson College in memory of his wife, Dorothy, and his daughter, Dr. Martha Myers, Baptist missionary who was martyred in late 2002 in Yemen.

Survivors include his wife, Woodie Myers; sons Grady Myers and Stephen Myers; daughter, Joanna Kingery, seven grandchildren and eight great-grandchildren.

# For Breastfeeding to Succeed, Mothers Need Support

he theme The World Alliance for Breastfeeding Action selected for Breastfeeding Awareness Month, August 2008, is "Mother Support: Going for the Gold!" to tie breastfeeding in with the Summer Olympic Games. As every country sent its best athletes to compete, the importance of offering each child a healthy start in life was emphasized. The word "gold" raises awareness of the superiority of breastfeeding. The theme calls on health professionals, employers, families and communities to provide a breastfeeding friendly environment that helps new mothers reach their breastfeeding goals.

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) educates pregnant women and new mothers about the health benefits of breastfeeding for both mother and child. Another goal of WIC is to increase the prevalence of breastfeeding among new mothers.

"For optimal growth and development we call for greater support for mothers in achieving the gold standard of infant feeding—breastfeeding exclusively for six months and providing appropriate complementary foods at six months with continued breastfeeding," Michell Grainger,

state lactation coordinator with the WIC Program, said.

The American Academy of Pediatrics supports breastfeeding as "uniquely superior for infant feeding" and recommends that breastfeeding start as soon after birth as possible.

Breastfeeding's benefits to the infant are as follows:

- Increases immunity to infectious diseases
- Enhances cognitive development
- Reduces risk of obesity, diabetes and asthma
- Reduces risk of death in infants over 1 month of age

The benefits of breastfeeding to mothers include the following:

- Reduced risk of pre-menopausal breast cancer and ovarian cancer
- Reduced risk of spinal and hip fractures in postmenopausal women
- Help in returning to pre-pregnancy weight more readily
- Fewer sick visits to the doctor and reduced health care costs

WIC provides prenatal counseling on the benefits of breastfeeding, furnishes breastfeeding supplies and pumps, and allows breastfeeding mothers to continue to receive benefits for up to one year after the baby's birth if the mother continues to breastfeed.

In addition, WIC provides a peer counseling program in several Alabama counties. Present or former WIC participants who have breastfed their babies serve as peer counselors. After extensive training, these counselors provide support to pregnant and breastfeeding mothers.

The Healthy People 2010 objectives of the U.S. Department of Health and Human Services are as follows: \*To have at least 75 percent of mothers breastfeed their infants in the early postpartum period \*To have 50 percent continue breastfeeding through 6 months of age \*For 25 percent to continue breastfeeding at 1 year of age.

For more information contact Michell Grainger, M.S.N., R.N.C., I.B.C.L.C., State Lactation Coordinator, WIC Program, Bureau of Family Health Services, at (334) 206-5673, mgrainger@adph.state.al.us.

# Steps Works with Trucking Company to Improve Employee Wellness

Region, first partnered with Boyd Brothers Trucking in the fall of 2006 to enhance the company's worksite wellness program. Boyd Brothers' mission is to promote healthier company drivers and associates on and off the road. The company has 100 "in-house" employees and 850 truckers.

Boyd Brothers is making the effort to improve the lives of its truckers while understanding that lifestyle factors related to truck driving are very different compared to office work. Lifestyles of truck drivers usually show an increase in the risk of high blood pressure, overweight, obesity, musculoskeletal disorders, cardiovascular disease, and possibly some cancers. These conditions may be related to poor diet, lack of physical activity, and sleep disorders resulting in stress. Truck drivers spend many hours driving and often eat and sleep in their trucks.

Boyd Brothers employs a health coach to help with all its wellness initiatives. The



trucker activities consist of an eight-week program including personal and private "health chats" with the health coach; blood pressure checks; and company store "dollars" for taking healthy steps. Boyd Brothers is in

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# County Health Department Employees Encouraged to Participate in Scale Back Alabama 2009

mployees from every area and county health department as well as the Central Office are encouraged to take part in the third year of the Scale Back Alabama weight loss competition. This 10-week program is designed to help adults lose weight in a healthy manner by eating sensibly and engaging in physical activity.

According to Dr. Donald Williamson, state health officer, Alabamians have a big challenge in terms of obesity, but one that can be met with the right information and motivation. "Our incidences of diabetes and heart problems are much higher than the rest of the nation, but so is our obesity rate," said Dr. Williamson. "We've simply got to get our citizens healthier, or my prediction is that this generation of Alabamians will be the first ever to not live as long as their parents."

County health departments are accessible to the public in every county, and recorded weigh-ins are required only at the beginning of the competition during the week of Jan. 10-16 and at the conclusion of the competition March 14-20. This year's goal is to have organizations in all 67 counties participate and to encourage Alabamians to lose half a million pounds.

"We are currently seeking local organization coordinators to help run the contest in county health departments for employees and to open facilities as public weigh-in/registration sites," said Dr. Williamson. "We want Scale Back to be available to everyone in the state who wants to be involved."

Organization coordinators will provide a place for the weigh-ins, promote the weigh-in site and hours during the officially designated times, and track individual beginning and

ending weights by computer. All information must be kept confidential.

Visit www.scalebackalabama.com to register as a coordinator and for more information. A comprehensive toolkit is there to assist individuals in hosting the contest in their communities.

Sponsors announced on Sept. 15 that Roger Shultz, a finalist in NBC's fifth season of the Biggest Loser contest, has been tapped to lead the state Scale Back's efforts to lose 500,000 pounds next year. Schultz will serve as the "coach" for the thousands of people expected to participate in 2009.

Schultz, who was an award-winning, All-American football player at the University of Alabama, worked for a spot on NBC's Biggest Loser's Couples show in 2008 and was a finalist in the contest. "One of the biggest motivators for me was that I wanted to be healthier and to set a good example for my son," said Schultz. "I realized that I was killing myself slowly with my habits and that I had to change. During the contest, I lost 164 pounds. It was hard work, but it was well worth it, and I want to see all Alabamians at least get a chance to become healthier."

Teams of four will compete for cash prizes and will be provided information on healthy eating habits and exercise through weekly lesson plans. In addition to health departments, local businesses, churches and other organizations are being encouraged to go to www.scalebackalabama.com to learn more about how they can involve their employees or other constituents in the contest.

If all four team members lose at least 10 pounds, that team will be placed in a drawing



Task Force Chaiman Donald Jones, administrator of Marion Regional Medical Center, (left) and Dr. Donald Williamson announced that Roger Schultz would be the 2009 campaign coach for Scale Back Alabama at a news conference Sept. 15. The campaign has set a 500,000 pound weight loss goal.

for one of three grand prizes (\$1,000 per team member, \$500 per team member and \$250 per team member).

Individuals who lose at least 10 pounds, even if their team members didn't, will be placed in a drawing for 50 cash prizes of \$100.

The statewide kickoff is set for Jan. 8.



Roger Schultz, Scale Back Alabama
"coach," is shown with Stephan
Mambazo, (left) Professional and
Support Services; Robbin Fuqua, (second
from right) Bureau of Information
Technology; and Sandra Blakely, (right)
Video Communications; after they
gathered for a big "Pride on 3" cheer.

# TEAMAcademy July Graduates



Patricia Allcorn, Tonya Appleyard, Cindy Ashley, Peggy Blakeney, Susan Bland, Rob Boyles, Kelly Browning, Kendall Bush, Phyllis Coughran, Paula Dubose, Sharon Eiland, Tracey England, Deann Fleming, Jessica Hardy, Jodi Henderson, Lisa Holifield, Chris Hutto, Seratia Johnson, Nancy Johnson, Donna Jordan, Shea Lamb, Tammy Langlois, Pam Lockett, Regina Majors, Barbara Moazen, Leigh Ann Murdock, Shirley Offutt, Val Patton, Denise Pope, Parrish Pugh, Donna Reynolds, Martha Sanchez, Mark Sestak, Termika Smith, Holley Swanson, Paige Taylor, Takisha Whitehurst, LaShunda Williams, Sylvia Worthy.



Chester Cochran, emergency preparedness coordinator for Public Health Area 5, retired Aug. 1 after 35 years of service to the Alabama Department of Public Health. He spent the majority of his career working in the STD Program and also served as disease intervention director for Area 5.

### Retirees

The following department employees have retired recently: **July** 

Julius Fred Grady - Epidemiology Division
Jane Haney - Talladega County Health Department
Catherine Knight - Geneva County Health Department
August

Chester Cochran - Area V
Joe Jackson - Pike County Health Department
Cathy Lee - Area V
September

Stephen Brown - DeKalb County Health Department
Deolinda Cipollari - Cullman County Health Department
Linda Kelley - Crenshaw County Health Department
Margie Riddle - Cullman County Health Department



Children with diabetes not only had fun at the Montgomery zoo they learned about nutrition, exercise and checking their blood sugar levels.

#### Steps, continued from page 5....

the process of developing Drive-n-Learns, which are the equivalent to Lunch-n-Learns; and they distribute a Road2Health newsletter.

The in-house employees have a recipe swap, Lunch-n-Learns, weekly health tips, health newsletter, Restroom Readers (information sheet on a particular topic placed in bathroom stalls), Stairwell campaign, B2W2 (a Boyd Brothers weight loss program); a free fruit snack program, an in-house gym, and free health screenings. An activity for both truckers and in house employees is Trucking Across North America. This is a physical activity program in which participants keep track of miles walked. Participants are part of a game where they start

out at a city and have to "walk" to another one.

The Southeast Alabama Region of Steps has helped Boyd Brothers with many of these initiatives by helping to develop the idea and materials needed for the Drive-n-Learns, developing and supplying Restroom Readers and Take the Stairs posters, providing trainthe-trainer sessions for a Mission Meltaway program and Healthy Steps Challenge, and providing healthy education materials to assist Boyd Brothers with their wellness initiatives.

Many of the health impacts Boyd Brother's Worksite Wellness has seen at this point have been observational. They have noticed

more employees using the in-house gym, more taking advantage of the free fruit snack program, some have quit smoking, and more are taking advantage of the free health screenings. After the completion of the Trucking Across North America Program, the number of people reporting to be sedentary dropped drastically from 30 percent prior to only 4 percent afterwards.

The company is headquartered in Clayton, Ala., and is one of the nation's largest flatbed truck carriers that operates throughout the eastern two-thirds of the United States and Mexico, hauling steel products and building materials.

# Health Disparities - Diabetes

This is the third in a series of articles exploring health issues that affect Alabamians, and focusing on disparities. Disparities are defined as differences in the incidence, prevalence, mortality and burden of cancer and related adverse health conditions that exist among specific population groups in the United States. These groups may be characterized by gender, age, ethnicity, education, income, social class, disability, geographic location or sexual orientation.

n estimated 10.3 percent of Alabamians have diabetes, and Alabama ranks fourth worst nationally in diabetes prevalence. Diabetes is the fourth leading cause of death for black and other race Alabamians; and it ranks fourth among black and other race females. According to the Center for Health Statistics, in 2006 black and other Alabamians died from diabetes at a rate of 41.0 per 100,000 population, while whites' rate of death was 27.1. Black and other death rates from diabetes are consistently higher than white rates.

According to the latest Burden of Diabetes Report for Alabama, notable differences exist between Caucasian and African American Alabamians with the prevalence of diabetes among African Americans being almost one and one-third the prevalence of diabetes among Caucasians. Although African Americans and other racial minorities comprise less than 29 percent of the state's total population, more than 35 percent of the estimated numbers of persons living with diabetes in the state are not Caucasian.

In the younger age groups (below 35 years of age), the percentage of persons with diabetes among African Americans is approximately the same as the percentage of persons with diabetes among whites. In the older age group (35 years of age and older), the

percentage of persons with diabetes among African Americans is approximately twice the percentage of persons with diabetes among whites.

Diabetes carries a significant financial impact. In 2007 the financial burden of diabetes in the United States was more than \$174 billion. Individuals with diagnosed diabetes incur average expenditures of \$11,744 per year, of which \$6,649 results from diabetes.

The geographic disparity in health care resources means that persons with diabetes who live in areas with more limited access to care incur greater costs associated with getting care (for example, time, travel expenses and lost wages).

Furthermore, health care professionals are not evenly distributed across the state. Health care for diabetes tends to be concentrated in counties with larger population bases, the more urban areas of the state, with fewer resources available to those persons who live in more rural areas. The majority of counties (55 of Alabama's 67 counties) do not have an endocrinologist practicing within the county. More than half (42) of Alabama's counties do not have a diabetes educator in the county, according to the American Association of Diabetes Educators. Almost 42 percent of respondents with diabetes on the 2007 BRFSS indicated that they had never taken a class or course on self-management of diabetes. Dr. Jack Hataway, medical director of the Chronic Disease Prevention Division, said, "Our strategies are to reduce the rate of diabetes and its complications among highrisk populations, increase early detection and treatment, and increase efforts on diabetes self management through outreach and education." Many factors increase the risk of developing diabetes. State-based programs must use strategies that target multiple

risk factors in different settings, including health care settings, communities, schools and worksites to be effective.

Alabama stakeholders are encouraged to build capacity, use evidence-based approaches when they exist, and develop innovative interventions to address diabetes prevention and management. As in adults Type 2 diabetes is a growing problem among adolescents and it disproportionately affects minority populations. One recent national study suggests that the current prevalence of type 2 diabetes has been linked to several factors, but much of this rise is thought to be related to the dramatic increase in obesity and sedentary lifestyles. There is concern that diabetes in children may continue to rise because more than 30 percent of adolescents, particularly minority children, are now considered overweight or are at risk for overweight.

Several factors cause obesity and overweight: food and nutrient consumption patterns, a lack of physical activity, and socioeconomic factors. In Alabama, the prevalence of obesity among persons with annual incomes at or below \$15,000 is 30.9 percent. In comparison, among persons with incomes at or above \$75,000, 20.8 percent are obese. Looking at education, obesity occurs in 26.3 percent of adults with less than a high school education, compared to 18.5 percent among college graduates. Geographically, counties in the lower third of the state are more likely to have high percentages of adults at risk for obesity and obesity-related health problems. The target date for eliminating health disparities is 2010. CDC and other public heath agencies intend to reduce deaths from diabetes by decreasing the overall rate of complications from diabetes and eventually by eliminating disparities among different groups.

# Alabama Statewide Cancer Registry Again Meets Gold Standard

he Alabama Department of Public Health recently received notification from the North American Association of Central Cancer Registries (NAACCR) that the Alabama Statewide Cancer Registry (ASCR) has once again met the Gold Standard for Registry Certification.

Dr. Jack Hataway, chronic disease medical director, said, "We are proud that our state's program has been recognized, thanks to the great efforts made by the staff of our registry. This information is vital to the ongoing work in cancer control and is the basis for the annual Cancer Registry Facts and Figures that is made available to health professionals and the public."

State cancer registries that are awarded Gold Certification have achieved the highest NAACCR standards for complete, accurate and timely data. The certification review is repeated annually and recognition only pertains to the most recent data submission. Alabama has achieved NAACCR standards

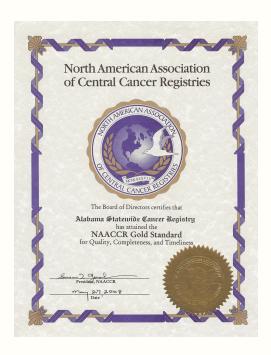
and received this certification since data year 2004.

Gold certification also assures that Alabama's cancer registry data is included in national publications such as Cancer in North America (CINA) and United States Cancer Statistics (USCS). To achieve gold certification, the data from the cancer registry must meet all of the following criteria:

- 95 percent or greater incidence reporting rate - Less than 3 percent of cases identified by death certificate only - Fewer than 0.1 percent duplicate case reports - Data variables for cancer type, sex, race, age and county are 100 percent error free - Less than 2 percent of case reports are missing data on age, sex and county - Less than 3 percent of cases are missing data on race

The Alabama Statewide Cancer Registry collects cancer incidence data which enables public health professionals, health care providers and health organizations to monitor

cancer trends in Alabama. State and county-level cancer incidence data compiled by the registry can be found in the 2007 Alabama Cancer Facts and Figures report and the county profiles located under "Publications" on the ASCR website at www.adph.org/cancer\_registry



# West Makes Presentations to Educators on Disaster Response Counseling

labama educators learned more about what they can do to help youngsters and their parents cope in the aftermath of disasters when Deputy Social Work Director Maury West made presentations to educators across the state at continuing education seminars this summer in Bay Minette, Birmingham, Decatur, Montgomery and Tuscaloosa. These presentations strengthened disaster preparedness and educated school counselors and social workers about crisis counseling.

"This was an opportunity to get introduced to the faculty who will be dealing with the students," West said, "and it was an excellent collaboration between the agencies. It was fun."

The request for presentations on disaster response counseling came from Dr. Sue Adams for staff and school counselors.

West said there are six key components of crisis counseling, stress management and self care. These tips are useful in all crisis situations, but the real effort for which he trained them is for disasters. This presentation was based on experience West gained following Hurricane Katrina when he spoke to shelters throughout the state.

Here are the points he made and urged counselors to remember:

- 1. Active listening
- 2. Validation that victims' reactions are real
- 3. Normalization—What they have experienced is a normal reaction to an abnormal situation
- 4. Psychological education—Like the typical behavioral responses to a disaster
- 5. Coping skills enhancement—People are resilient and have coping skills that they have employed before
- Resources and referrals—Services disaster victims need

West emphasized that a compassionate presence is what is most needed, and finally, volunteers should never tell those affected by disaster, "I know how you feel."

# ADPH Receives Third Consecutive Perfect Property Audit

State Auditor Samantha Shaw has recognized the department for its summer 2008 property audit. Audits are conducted every two years, and the department was awarded a Certificate of Commendation acknowledging a perfect audit of state property.

"This achievement was made possible thanks to property managers throughout the state and a property inventory system developed by the Bureau of Information Technology that identifies and provides the location of computer network items," Jane Ellen Taylor, department property manager with Logistics, said. This system actively identifies and provides the location of computer network items which can be attached to the Bureau of Information Technology network.

"I can't say enough about the property managers," Ms. Taylor said. "Their level of preparation was just great, and Information Technology and Financial Services had an important part in it."

The department will be highlighted in an upcoming publication of the Auditors' Office. In preparation, the following questions were asked and answered about our audit process.

## 1. How many locations does ADPH have that are audited?

160

2. How many personal property items valued at \$500 and above does ADPH have in the system, and what is the value of these items?

14,706 items worth \$30,027,239.60

3. What are some of your biggest challenges you face in properly tracking

all the property owned by such a large agency with so many locations?

- Updating of technical equipment.
- Keeping up with the Alabama Department of Public Health's plan in which health facilities are replaced
- Always trying to live within our travel budget.
- Extensive filing and accurate record keeping are essential.

## 4. How have you overcome these challenges?

Our Property Team works closely with Unit Property Managers and the Bureau of Information Technology. We use fax and e-mails as much as possible. We plan and run surplus routes to conserve.

5. What procedures does ADPH have in place to track all the items including new items; items that are reported as lost, stolen or destroyed; and items transferred to other agencies as well as Surplus. In other words, what are your Best Practices?

We use a Property History Card which improves our ability to track the custody of property. The Unit Property Manager does a certification (self-audit) and we follow up with a preaudit. We do regular surplus pickups to help keep inventory clean. Also we have a working relationship with the Alabama Department of Economic and Community Affairs that allows us to transfer property to surplus or other agencies.

6. What improvements have been made to your agency's procedures to decrease the time and cost involved with completing the property audit, especially with an agency as large as ADPH?

We have increased our Property Team to four people, which allows us to complete the State Audit in one-fourth of the time. By utilizing the electronic inventory verification process that was created by Information Technology, we were able to reduce the total amount of property to be physically accounted for by half. This process performs an inventory when the user turns on or logs on a network item, such as laptop, personal computer and printers. Public Health has gone from a 12-week audit to a three-week audit in just four years as a result of this system.

- 7. What improvements have been made to increase the efficiency of your property audits resulting in perfect audits for the last three audit cycles?
- Preplanning months ahead.
- Including all network items in the electronic inventory verification process.
- Being proactive on transferring property to other agencies. The level of preparedness by the Unit Property Manager was evident and makes a tremendous impact in completing the audits in record time.

# 8. What is the State Health Officer's philosophy or commitment regarding personal property of ADPH?

Dr. Donald Williamson, State Health Officer, expressed his support for property management, stating, "We place a lot of emphasis on safeguarding the property paid for by the citizens of Alabama. Several years ago, we formed a focused team consisting of property custodians, property managers, and IT staff. They worked together to train on property management procedures and we also developed automation to keep tabs on networked equipment. We engaged all our employees and they bought into

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#### Audit, continued from page 10....

the importance of good stewardship. As a result, we have had three consecutive perfect property audits. I am proud of our agency's accomplishments."

9. What advice can you give agencies that have problems with properly tracking all personal property and inputting new items in a timely manner?
Put good people in responsible places.

The persons who safeguard and account for departmental property include the following:

#### **ADPH PROPERTY MANAGERS**

#### **PUBLIC HEALTH AREA 1**

Brenda Bearden, Jane Crow, Theresa Gasaway, Sonja Rogers, Judy Stephens, Sheila Woods

#### **PUBLIC HEALTH AREA 2**

Melinda Adams, Pat Allcorn, Janice Gohn, Clariece Howse, Sonya Tinsley, Diane West

#### **PUBLIC HEALTH AREA 3**

Lisa Holifield, Tracey Holladay, Coretta Kirkland, Debbie Knight, Wanda Knight, Sandra McCool, Karen Ralston

#### **PUBLIC HEALTH AREA 4**

Florenda Bryant, Woody Hines

#### **PUBLIC HEALTH AREA 5**

Tamara Clem, Novalee Dewitt, Shelia Keller, Patty Leonard, Tanga St. John, Rebecca Sherrell

#### **PUBLIC HEALTH AREA 6**

Edith Billingslea, Helen Holcomb, Sarah Holland, Donna Hydrick, Pauline Mallard, Ramona Warren, Holly West, Jeanette Whaley, Debra White

#### **PUBLIC HEALTH AREA 7**

Vickie Abate, Norma Cannon, Cindy Crawford, Debbie Curry, Nedra Driver, Judy Falkenberry, Tina Garrett, Deborah Pullom

#### **PUBLIC HEALTH AREA 8**

Lylita Crayton Bene', John Blackmon, Floy Crowley, Brenda Denard, Bettie Dixon, Mary Jo Dyer, Angie Garnett, June Grier, Peggy Harrelson, Ann Langley, John Martin, LaMargaret Powell, Barbara Sarmiento, Cindy Tufts, Sylvia Ware

#### **PUBLIC HEALTH AREA 9**

Janet Bush, Teresa Compton, Selena Dreadin, Paula Dubose, Rita Evans, Annette Hall, Tam Horton, Jill Lee, Sheila Mancil, Gayle Scarbrough, Suzanne Tate, Merita Wiley

#### **PUBLIC HEALTH AREA 10**

Demetrius Butler, Treva Clayton, Cynthia Deal, Josephine Forte, Rosemary Henson, Vickie Haynes, Kathy Mobley, Diane Pelham, Sylvia Pope, Stacey Sullivan, Cathy Ward, Sonya Wheeler

#### **PUBLIC HEALTH AREA 11**

Ann Griffin, Jeff McCool, William Smith

#### **RSA TOWER**

Glenda Ambers, La Toya Bailey, Sandra Blakely, Pam Brown, Twanna Brown, Shirley Calloway, Ashley Chapman, James Coley, Pat Conner, Tameka Cooper, Ron Dawsey, Beverly Frank, G.M. Gallaspy, Rene Gilchrist, Gwen Glover, Sherry Goode, Carol Gray, Kevin Hicks, Mark Jackson, Zandra Harris, Denise Milledge, Vanessa Mitchell, William Myrick, Bob Nyberg, Val Patton, Bernice Robertson, Cheri Roy, Kent Speigner, Ellen Stone, Debra Thrash, Chauntye Williams, Daphne Williams, Angela Young



Shown, left to right, are Shawn Rogers, Jane Ellen Taylor, Guy Woodall, Genevieve Moore, Chris Daughtry and Peggy Harrelson.



Genevieve Moore and Jane Ellen Taylor check the barcode on a fax machine.



Tuscaloosa County Health Department employees recognized disease intervention specialists with a unique and special day designated to celebrate the vital work they do in our communities. Colleagues from Tuscaloosa provided a covered dish luncheon in July. Joining the annual celebration this year were state leaders from the Division of Disease Control.

# Calendar of Events



October 2 • Satellite Conference

ADPH Statewide Staff Meeting, 3-4 p.m. State Health Officer Dr. Don Williamson will discuss programmatic issues with staff. Submit questions before the conference: fax (334-206-5640) or email (alphtnquestions@adph.state.al.us).

For more information contact Video Communications, (334) 206-5618.



October 7 • Satellite Conference
Saving the Teenage Driver, 11 a.m.-1 p.m.

For more information contact Sandy Powell, (334) 206-5050.



October 10 • Satellite Conference Cervical Cancer, 1-3 p.m.

For more information contact Kitty Norris, (334) 206-6227.



November 5 • Satellite Conference
Home Health Aides and Attendants, 2-4 p.m.

For more information contact Brenda Elliott, (334) 347-2664, extension 402.